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MULTIPLE	DEPENDE	NT CLAIM
FEE CAL	.CULATIO	N SHEET
(FOR USE	WITH FORM	PTO-875)

SERIAL NO. FILING DATE APPLICANT(S)

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	AS FILED			AFTER 1st AMENDMENT 2nd		TER NDMENT		*		*		*	
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TOTAL CLAIMS	19	100		11.		100	TOTAL CLAIMS		r.		(1)		2004

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

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